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STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

APR 18 2017

NEW HAMPSHIRE

I. Name of Lobbyist(s) <u>Joseph R</u>	. Murray		DEPARTMENT OF
II. Name of lobbyist's partnership.	firm or corporation, if a	ny:	
FMR LLC			
(Name of partnership	o, firm or corporation)		
One Spartan Way Business Address: (Street)	Merrimac (Town/City)	(State)	03054 (Zip Code)
(603) <u>791-5727</u> (Telephone)	()(Fax	e-mail <u>jose</u> r	oh.murray@fmr.com
III. This statement covers: (Choose reportable expense transactions w			ı may file a separate report for
☐ All reportable transactions occur	ring in the months prior to	the reporting date relative t	o the following client:
FMR LLC	· · · · · · · · · · · · · · · · · · ·		
· ·	Client as it appears on the L	obbyist Registration Form)	
OR ☐ All reportable transactions by the unrelated to any particular client.	lobbyist (including the lol	obyist's family), or the lobb	ying firm listed below which are
IV. Date of Report April 26, 20 Reports cover: activity from date of	117 X registration to 3/31/17	July 26, 2017 [] activity from 4/1/17 to 6/3	
October 25. activity from 7/		January 31, 2018 activity from 10/1/17 to 1	
V. There have been no fees reco If this box is checked, complete just a Concord, NH 03301.			
VI. Check if additional reports are	attached:		
X If you have received fees or made		file Addendum A – Fees an	d Expenses
[] If you have paid an honorarium Expense Reimbursement	or reimbursed expenses, y	ou must file Addendum B-	- Report of Honorariums or
☐ If you, your firm, or your family	has made political contrib	outions, you must file Adde	ndum C– Political Contributions
Sworn Statement/Affirmation by I have read RSA 15, RSA 15-B, RSA and complete to the best of my know (Signature of lobbyist) Joseph R. Murray (Print Name of lobbyist)	A 14-C and RSA 664 and I	_	the foregoing information is true (Date)

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) <u>Joseph R. Murray</u>	
II. Name of lobbyist's partnership, firm or corporation, if any:	
FMR LLC	
(Name of partnership, tirm or corporation)	
III. Name of Client FMR LLC	Date
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:	relations, or public relations services
a) Total of all fees received in this reporting period	a) \$ _7,155.00
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	
c) Total of all fees received to date (Add lines a and b)	c) \$ _7,155.00
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	elient and if expenditures are made by may be filed for the lobbyist(s)/firm e aggregate total of all expenses paic expenses; (b) the aggregate total of all see meals purchased during a business as than \$10 that is given to the persor and with a value of \$25.00 or less); and corting period of greater than \$25.00 for the of greater than \$25, purchase of a fer than \$25, but not greater than \$50, expense reimbursement, or politica
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	f) \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
	·
Sworn Statement/Affirmation by Lobbyist	w that the foregoing information
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	in that the foregoing information
Signature of Johnson	4/10/17
(Signature of foodylst)	(Date)
Joseph R. Murray (Print Name of lobbyist)	